DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS CNA (NONAMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: SUN VALLEY HOMES LLC WEST (0010970)

Address: 2156 HOUSE ST, BELOIT, WI 53511

License Status: REGULAR

Licensed/Certified/Registered 12/01/2005

Regional Office: SOUTHERN REGION (MADISON), (608) 243-2370

Survey History			
Survey ID: 0096367	End Date: 02/15/2006	Type: STANDARD	Purpose: COMPLAINT
Results: NO STATEMENT OF DEFICIENCY ISSUED			
Survey ID: 0096307	End Date: 02/01/2006	Type: STANDARD	Purpose: SURVEY/SELF REPORT
Results: NO STATEMENT OF DEFICIENCY ISSUED			
Survey ID: 0094902	End Date: 05/23/2005	Type: INITIAL	Purpose: SURVEY
Results: PROBATIONARY LICENSE ISSUED			

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Complaint History

Date Complaint Received: 01/17/2006 Date Investigation Completed: 02/08/2006

Subject Area(s) Result SOD #

SUPERVISION NOT SUBSTANTIATED